

Fill in this information to identify your case and this filing:

Debtor 1	Tameia	M.	Frank
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Southern		District of	Texas
Case number 24-33165			

Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

No. Go to Part 2.

Yes. Where is the property?

1.1

Street address, if available, or other description

What is the property? Check all that apply.

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other _____

City _____ State _____ ZIP Code _____

County _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property?

Current value of the portion you own?

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Check if this is community property (see instructions)

Other information you wish to add about this item, such as local property identification number: _____

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here →

\$0.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- No
- Yes

Debtor Frank, Tameia M.Case number (if known) 24-33165

3.1	Make: <u>Mercedes-Benz</u>	Who has an interest in the property? Check one.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i> .	
	Model: <u>GLE 450</u>	<input type="checkbox"/> Debtor 1 only	Current value of the entire property?	Current value of the portion you own?
	Year: <u>2017</u>	<input type="checkbox"/> Debtor 2 only	<u>unknown</u>	<u>unknown</u>
	Approximate mileage: <u>126000</u>	<input checked="" type="checkbox"/> At least one of the debtors and another	<input checked="" type="checkbox"/> Check if this is community property (see instructions)	
Other information:				
<p>Source of Value: KBB.com Private Party Sale Value Vehicle was totaled in an auto accident on 07/28/2024</p>				

If you own or have more than one, describe here:

3.2	Make: <u>Ford</u>	Who has an interest in the property? Check one.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i> .	
	Model: <u>F-150 Truck</u>	<input type="checkbox"/> Debtor 1 only	Current value of the entire property?	Current value of the portion you own?
	Year: <u>2014</u>	<input type="checkbox"/> Debtor 2 only	<u>\$14,129.00</u>	<u>\$7,064.50</u>
	Approximate mileage: <u>140000</u>	<input checked="" type="checkbox"/> At least one of the debtors and another	<input checked="" type="checkbox"/> Check if this is community property (see instructions)	
Other information:				
<p>Source of Value: KBB.com Private Party Sale Value</p>				

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- No
 Yes

4.1	Make: _____	Who has an interest in the property? Check one.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i> .	
	Model: _____	<input type="checkbox"/> Debtor 1 only	Current value of the entire property?	Current value of the portion you own?
	Year: _____	<input type="checkbox"/> Debtor 2 only	_____	_____
	Other information:	<input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Check if this is community property (see instructions)	
<p>_____</p>				

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here →\$7,064.50**Part 3: Describe Your Personal and Household Items**

Do you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own?
Do not deduct secured claims or exemptions.	

Debtor Frank, Tameia M.Case number (if known) 24-33165**6. Household goods and furnishings***Examples:* Major appliances, furniture, linens, china, kitchenware No Yes. Describe.

King-sized Bed (\$400), 2 Nightstand and Fireplace Place Chest (\$200), Bunk Bed with Drawers (\$300), Children's Desk (\$100), Sectional Couch (\$1,500), Leather Table (\$800), Entertainment Center (\$50), Dining Table and 4 Chairs (\$300), 3 Leather Barstools (\$200), 2 Office Desks (\$300), 2 Desk Chairs (\$50), Small Appliances (\$100), Kitchen Cookware, Dishes, Silverware, and other Kitchen Items (\$300), Children's Toys and Books (\$500), and Misc. Household Goods, Furnishings, and Personal Items (\$250)

\$5,350.00**7. Electronics***Examples:* Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games No Yes. Describe.

65" TV (\$500), 60" TV (\$400), Small TV (\$100), Gaming Computer with Monitor and Accessories--Husband's (\$2,500), Laptop and Monitor (\$300), 2 iPads (\$350), XBox, PlayStation, Nintendo Switch and Games (\$700), iPhone 15 (\$400), Samsung Note (\$300), and Misc. Electronics (\$200)

\$5,750.00**8. Collectibles of value***Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe.**9. Equipment for sports and hobbies***Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe.**10. Firearms***Examples:* Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe.**11. Clothes***Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories No Yes. Describe.

Clothing and Misc. Wearing Apparel, Handbags \$2,000.00

Debtor Frank, Tameia M.Case number (if known) 24-33165**12. Jewelry**

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

 No Yes. Describe.**Misc. Jewelry****\$200.00****13. Non-farm animals**

Examples: Dogs, cats, birds, horses

 No Yes. Describe.**14. Any other personal and household items you did not already list, including any health aids you did not list** No Yes. Give specific information.**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here** →**\$13,300.00****Part 4: Describe Your Financial Assets****Do you own or have any legal or equitable interest in any of the following?**

**Current value of the portion you own?
Do not deduct secured claims or exemptions.**

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

 No Yes Cash:**17. Deposits of money**

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

 No Yes Institution name:**Navy Federal Credit Union Checking****Account Number: -1281****\$2,806.00**

17.1. Checking account:

Navy Federal Credit Union Savings**Account Number: -3062****\$2.02**

17.2. Savings account:

Capital One Checking and Savings (Non-filing spouse's account, Byron Jones)**\$1,000.00**

17.3. Other financial account:

For Disclosure Purposes: Business Checking Account for Sweet Treats with L and L LLC dba Sweets with L&L Cotton Candy Balance: \$4,000 (no equity for Tameia Frank's personal bankruptcy case)

\$0.00

17.4. Other financial account:

Debtor Frank, Tameia M.Case number (if known) 24-33165**18. Bonds, mutual funds, or publicly traded stocks***Examples:* Bond funds, investment accounts with brokerage firms, money market accounts No Yes Institution or issuer name:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No Yes. Give specific information about them.....

Name of entity:

% of ownership:

**Sole member of Sweet Treats and L and L LLC
dba Sweets with L&L Cotton Candy
(See Stmt. Fin. Aff #18)**

100.00%unknown**20. Government and corporate bonds and other negotiable and non-negotiable instruments***Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.
Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No Yes. Give specific information about them.....

Issuer name:

21. Retirement or pension accounts*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No Yes. List each account separately. Type of account: Institution name:

401(k) or similar plan:	<hr/>	<hr/>
Pension plan:	<hr/>	<hr/>
IRA:	<hr/>	<hr/>
Retirement account:	<hr/>	<hr/>
Keogh:	<hr/>	<hr/>
Additional account:	<hr/>	<hr/>
Additional account:	<hr/>	<hr/>

Debtor Frank, Tameia M.Case number (if known) 24-33165**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Yes

Institution name or individual:

Security deposit on rental unit: **For disclosure purposes: No security deposit required due to special rate.**

\$0.00

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Yes Issuer name and description:

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

 No Yes Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No Yes. Give specific information about them.**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property***Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements No Yes. Give specific information about them.Website: sweetslandl.com

unknown

27. Licenses, franchises, and other general intangibles*Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No Yes. Give specific information about them.

Debtor Frank, Tameia M.Case number (if known) 24-33165

Money or property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax refunds owed to you		
<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Give specific information about them, including whether you already filed the returns and the tax years.		
For disclosure purposes: Debtor received a tax refund for tax year 2023 prior to the bankruptcy filing.		Federal: <u>\$0.00</u>
		State: _____
		Local: _____
29. Family support		
<i>Examples:</i> Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement		
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Give specific information.		
<input type="text"/>		Alimony: _____ Maintenance: _____ Support: _____ Divorce settlement: _____ Property settlement: _____
30. Other amounts someone owes you		
<i>Examples:</i> Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else		
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Give specific information.		
<input type="text"/>		_____
31. Interests in insurance policies		
<i>Examples:</i> Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance		
<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Name the insurance company of each policy and list its value.		
Company name: <u>Protective Life--(3) Term Life Policies (no cash surrender value)</u> <u>Spouse and Children</u>		Beneficiary: _____ Surrender or refund value: <u>\$0.00</u>
32. Any interest in property that is due you from someone who has died		
If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.		
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Give specific information.		
<input type="text"/>		_____

Debtor Frank, Tameia M.Case number (if known) 24-33165**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment***Examples:* Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim.

For Disclosure Purposes: Tameia Frank, her husband Byron Frank, and their two daughters were involved in an auto accident on 07/28/2024. This is not a prepetition claim. Their 2017 Mercedes-Benz GLE 450 is believed to be totaled. The Debtor and her family also have personal injury claims against the other driver.

unknown**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims** No Yes. Describe each claim.**35. Any financial assets you did not already list** No Yes. Give specific information.**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here** →**\$3,808.02****Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.****37. Do you own or have any legal or equitable interest in any business-related property?** No. Go to Part 6. Yes. Go to line 38.
**Current value of the portion you own?
Do not deduct secured claims or exemptions.**
38. Accounts receivable or commissions you already earned No Yes. Describe.**39. Office equipment, furnishings, and supplies***Examples:* Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices No Yes. Describe.**40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade** No Yes. Describe.

Debtor Frank, Tameia M.Case number (if known) 24-33165**41. Inventory** No Yes. Describe

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42. Interests in partnerships or joint ventures No Yes. Describe

Name of entity:

% of ownership:

43. Customer lists, mailing lists, or other compilations No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? No Yes. Describe

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44. Any business-related property you did not already list No Yes. Give specific information

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here →

\$0.00

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47.

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

Debtor Frank, Tameia M.Case number (if known) 24-33165**47. Farm animals**

Examples: Livestock, poultry, farm-raised fish

 No Yes

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48. Crops—either growing or harvested No Yes. Give specific information.

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49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade No Yes

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50. Farm and fishing supplies, chemicals, and feed No Yes

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51. Any farm- and commercial fishing-related property you did not already list No Yes. Give specific information.

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52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here →

\$0.00

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above**53. Do you have other property of any kind you did not already list?**

Examples: Season tickets, country club membership

 No Yes. Give specific information.

54. Add the dollar value of all of your entries from Part 7. Write that number here →

\$0.00

Part 8: List the Totals of Each Part of this Form**55. Part 1: Total real estate, line 2** →

\$0.00

56. Part 2: Total vehicles, line 5 \$7,064.50**57. Part 3: Total personal and household items, line 15** \$13,300.00

Debtor Frank, Tameia M.Case number (if known) 24-33165

58. Part 4: Total financial assets, line 36	<u>\$3,808.02</u>
59. Part 5: Total business-related property, line 45	<u>\$0.00</u>
60. Part 6: Total farm- and fishing-related property, line 52	<u>\$0.00</u>
61. Part 7: Total other property not listed, line 54	<u>+ \$0.00</u>
62. Total personal property. Add lines 56 through 61.	<u>\$24,172.52</u>
	Copy personal property total → + <u>\$24,172.52</u>
63. Total of all property on Schedule A/B. Add line 55 + line 62.	<u>\$24,172.52</u>

Fill in this information to identify your case:

Debtor 1	Tameia	M.	Frank
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		Southern	District of Texas
Case number 24-33165 (if known)			

Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim <i>Check only one box for each exemption.</i>	Specific laws that allow exemption
Brief description: <u>2014 Ford F-150 Truck</u>	<u>\$7,064.50</u>	<input checked="" type="checkbox"/> <u>\$0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(2)</u>
Line from <i>Schedule A/B</i> : <u>3.2</u>		<input checked="" type="checkbox"/> <u>\$0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(5)</u>

3. Are you claiming a homestead exemption of more than \$189,050?

(Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.)

- No
 Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
 No
 Yes

Debtor 1

Tameia**M.****Frank**

First Name

Middle Name

Last Name

Case number (if known) 24-33165

Part 2:

Additional Page

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim <i>Check only one box for each exemption.</i>	Specific laws that allow exemption
Brief description: King-sized Bed (\$400), 2 Nightstand and Fireplace Place Chest (\$200), Bunk Bed with Drawers (\$300), Children's Desk (\$100), Sectional Couch (\$1,500), Leather Table (\$800), Entertainment Center (\$50), Dining Table and 4 Chairs (\$300), 3 Leather Barstools (\$200), 2 Office Desks (\$300), 2 Desk Chairs (\$50), Small Appliances (\$100), Kitchen Cookware, Dishes, Silverware, and other Kitchen Items (\$300), Children's Toys and Books (\$500), and Misc. Household Goods, Furnishings, and Personal Items (\$250) Line from <i>Schedule A/B</i> : <u>6</u>	<u>\$5,350.00</u>	<input checked="" type="checkbox"/> <u>\$5,350.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(3)</u>

Debtor 1 Tameia M. Frank Case number (if known) 24-33165

First Name Middle Name Last Name

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Brief description: <u>65" TV (\$500), 60" TV (\$400), Small TV (\$100), Gaming Computer with Monitor and Accessories-- Husband's (\$2,500), Laptop and Monitor (\$300), 2 iPads (\$350), XBox, PlayStation, Nintendo Switch and Games (\$700), iPhone 15 (\$400), Samsung Note (\$300), and Misc. Electronics (\$200)</u>	<u>\$5,750.00</u>	<input checked="" type="checkbox"/> <u>\$5,750.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(3)</u>
Line from Schedule A/B: <u>7</u>			
Brief description: <u>Clothing and Misc. Wearing Apparel, Handbags</u>	<u>\$2,000.00</u>	<input checked="" type="checkbox"/> <u>\$2,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(3)</u>
Line from Schedule A/B: <u>11</u>			
Brief description: <u>Misc. Jewelry</u>	<u>\$200.00</u>	<input checked="" type="checkbox"/> <u>\$200.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(4)</u>
Line from Schedule A/B: <u>12</u>			
Brief description: <u>Capital One Checking and Savings (Non-filing spouse's account, Byron Jones) Other financial account</u>	<u>\$1,000.00</u>	<input checked="" type="checkbox"/> <u>\$1,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(5)</u>
Line from Schedule A/B: <u>17</u>			
Brief description: <u>Navy Federal Credit Union Checking Checking account Acct. No.: -1281</u>	<u>\$2,806.00</u>	<input checked="" type="checkbox"/> <u>\$2,806.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(5)</u>
Line from Schedule A/B: <u>17</u>			

Debtor 1

TameiaM.FrankCase number (if known) 24-33165

First Name

Middle Name

Last Name

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Brief description: Navy Federal Credit Union Savings Savings account Acct. No.: -3062	<u>\$2.02</u>	<input checked="" type="checkbox"/> <u>\$2.02</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(5)</u>
Line from Schedule A/B: <u>17</u>			
Brief description: For Disclosure Purposes: Business Checking Account for Sweet Treats with L and L LLC dba Sweets with L&L Candy Balance: \$4,000 (no equity for Tameia Frank's personal bankruptcy case) <u>Other financial account</u>	<u>\$0.00</u>	<input checked="" type="checkbox"/> <u>\$4,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(5)</u>
Line from Schedule A/B: <u>17</u>			
Brief description: Sole member of Sweet Treats and L and L LLC dba Sweets with L&L Cotton Candy (See Stmt. Fin. Aff #18)	<u>unknown</u>	<input checked="" type="checkbox"/> <u>unknown</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(5)</u>
Line from Schedule A/B: <u>19</u>			
Brief description: Website: sweetslandl.com	<u>unknown</u>	<input checked="" type="checkbox"/> <u>unknown</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(5)</u>
Line from Schedule A/B: <u>26</u>			
Brief description: Protective Life--(3) Term Life Policies (no cash surrender value)	<u>\$0.00</u>	<input checked="" type="checkbox"/> <u>\$0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit <input checked="" type="checkbox"/> <u>\$0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit <input checked="" type="checkbox"/> <u>\$0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(7)</u> <u>11 U.S.C. § 522(d)(11)(C)</u> <u>11 U.S.C. § 522(d)(10)(B)</u>
Line from Schedule A/B: <u>31</u>			

Debtor 1

TameiaM.Frank

First Name

Middle Name

Last Name

Case number (if known) 24-33165

Part 2:

Additional Page

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim <i>Check only one box for each exemption.</i>	Specific laws that allow exemption
Brief description: <u>For Disclosure Purposes: Tameia Frank, her husband Byron Frank, and their two daughters were involved in an auto accident on 07/28/2024. This is not a prepetition claim. Their 2017 Mercedes-Benz GLE 450 is believed to be totaled. The Debtor and her family also have personal injury claims against the other driver.</u>	<u>unknown</u>	<input checked="" type="checkbox"/> <u>unknown</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit <input checked="" type="checkbox"/> <u>unknown</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(11)(D)</u> <u>11 U.S.C. § 522(d)(11)(E)</u>
Line from <i>Schedule A/B</i> : <u>33</u>			

Fill in this information to identify your case:

Debtor 1	Tameia	M.	Frank
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Southern		District of Texas	
Case number (if 24-33165 known)			

Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any	
2.1 JPMCB - AUTO FINANCE Creditor's Name PO BOX 901003 Number Street FORT WORTH, TX 76101 City State ZIP Code	Describe the property that secures the claim: 2014 Ford F-150 Truck	\$15,828.00	\$7,064.50	\$8,763.50
Who owes the debt? Check one.	As of the date you file, the claim is: Check all that apply.			
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim relates to a community debt	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____			
Date debt was incurred 1/10/2022	Last 4 digits of account number	4 1 0 4		
Add the dollar value of your entries in Column A on this page. Write that number here: \$15,828.00				

Debtor 1

Tameia**M.****Frank**Case number (if known) 24-33165

First Name

Middle Name

Last Name

Part 1: Additional Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any

2.2 **MERCEDES BENZ FINANCA** Describe the property that secures the claim: \$50,943.00 \$0.00 \$50,943.00

Creditor's Name 36455 CORPORATE DR	2017 Mercedes-Benz GLE 450 Vehicle was totaled in an auto accident on 07/28/2024
Number Street	

FARMINGTON HILLS, MI 48331

City	State	ZIP Code
------	-------	----------

Who owes the debt? Check one.
 Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another

Nature of lien. Check all that apply.
 An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit Other (including a right to offset) _____

Check if this claim relates to a community debt

Date debt was incurred 12/20/2021 Last 4 digits of account number 9 0 0 1

Add the dollar value of your entries in Column A on this page. Write that number here:	<u>\$50,943.00</u>
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:	<u>\$66,771.00</u>

Fill in this information to identify your case:

Debtor 1	Tameia	M.	Frank
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		Southern	District of Texas
Case number 24-33165 (if known)			

Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- No. Go to Part 2.
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

		Total claim	Priority amount	Nonpriority amount	
2.1	U.S. Small Business Administration Priority Creditor's Name 409 3rd St Sw Number Street Washington, DC 20416-0011 City State ZIP Code	Last 4 digits of account number 9 1 0 8 When was the debt incurred? 12/20/2021	\$170,100.00	\$0.00	\$170,100.00
As of the date you file, the claim is: Check all that apply. <p> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed </p>					
Type of PRIORITY unsecured claim: <p> <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____ </p>					
Who incurred the debt? Check one. <p> <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt </p>					
Is the claim subject to offset? <p> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes </p>					
Remarks: SBA Business Loan for Tamei M. Frank dba Sweets with L and L					

Debtor 1	Tameia	M.	Frank	Case number (if known) <u>24-33165</u>
	First Name	Middle Name	Last Name	
Part 2: List All of Your NONPRIORITY Unsecured Claims				
3. Do any creditors have nonpriority unsecured claims against you?				
<input type="checkbox"/> No. You have nothing to report in this part. Submit this form to the court with your other schedules. <input checked="" type="checkbox"/> Yes				
4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.				
				Total claim
4.1	Blue Ridge Bank, NA		Last 4 digits of account number	\$20,300.00
Nonpriority Creditor's Name				
17 W Main St		When was the debt incurred? _____		
Number	Street			
Luray, VA 22835-1230		As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Who incurred the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt _____				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
Remarks: Commercial Loan				
4.2	CAPITAL ONE		Last 4 digits of account number	\$392.00
Nonpriority Creditor's Name				
PO BOX 31293		When was the debt incurred? <u>3/27/2019</u>		
Number	Street			
SALT LAKE CITY, UT 84131		As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Who incurred the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt _____				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor 1 Tameia M. Frank Case number (if known) 24-33165
 First Name Middle Name Last Name

Part 2: **Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.					Total claim	
4.3 CONN APPLIANCES INC Nonpriority Creditor's Name <u>1401 RANKIN RD STE 300</u> Number Street <u>HOUSTON, TX 77073</u> City State ZIP Code					Last 4 digits of account number <u>2 7 7 0</u> When was the debt incurred? <u>11/28/2019</u> As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$1,422.00
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt					Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes						
4.4 CREDIT ONE BANK Nonpriority Creditor's Name <u>6801 S. CIMARRON ROAD</u> Number Street <u>LAS VEGAS, NV 89113</u> City State ZIP Code					Last 4 digits of account number <u>6 1 6 5</u> When was the debt incurred? <u>8/7/2020</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$569.00
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt					Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>	
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes						

Debtor 1 Tameia M. Frank Case number (if known) 24-33165
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.				Total claim
4.5 DEPT OF EDUCATION/NELN	Nonpriority Creditor's Name 121 S 13TH ST	Number Street	Last 4 digits of account number 0 9 7 3	\$48,293.00
			When was the debt incurred? 7/5/2016	
As of the date you file, the claim is: Check all that apply.				
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
Who incurred the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt				
Type of NONPRIORITY unsecured claim:				
<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
4.6 FIRST PREMIER	Nonpriority Creditor's Name 3820 N LOUISE AVE	Number Street	Last 4 digits of account number 1 9 3 4	\$335.00
			When was the debt incurred? 6/16/2017	
As of the date you file, the claim is: Check all that apply.				
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
Who incurred the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify CreditCard				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor 1 Tameia M. Frank Case number (if known) 24-33165
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.7	Fundersapp.com Nonpriority Creditor's Name <u>3323 Ne 163rd St Ste 401</u> Number Street	Last 4 digits of account number _____	unknown
		When was the debt incurred? _____	
	<u>N Miami Beach, FL 33160-5596</u> City State ZIP Code	As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
		Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____	
	Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt		
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.8	Funding Metrics, LLC Nonpriority Creditor's Name <u>Quick Fix Capital</u> <u>3220 Tillman Dr</u> Number Street	Last 4 digits of account number _____	\$8,830.00
	<u>Bensalem, PA 19020-2050</u> City State ZIP Code	When was the debt incurred? _____ <u>6/12/2023</u>	
		As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	
	Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____	
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Remarks: Business Debt		

Debtor 1 Tameia M. Frank Case number (if known) 24-33165
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.9	Jaris Funding LLC Nonpriority Creditor's Name 345 Lorton Ave Number Street Burlingame, CA 94010 City State ZIP Code	Last 4 digits of account number _____	When was the debt incurred? _____	As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Total claim <u>unknown</u>
			Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Business Debt</u>		
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt					
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes					
Remarks: For Notice Purposes					
4.10	JEFFERSON CAPITAL SY Nonpriority Creditor's Name 200 14TH AVENUE EAST Number Street SARTELL, MN 56377 City State ZIP Code	Last 4 digits of account number <u>6 7 4 3</u>	When was the debt incurred? <u>6/22/2023</u>	\$3,631.00	
			As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
			Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Factoring Company Account</u>		
			Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt		
			Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor 1 Tameia M. Frank Case number (if known) 24-33165

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.					Total claim
4.11	JEFFERSON CAPITAL SYST	Nonpriority Creditor's Name	Last 4 digits of account number	X X X X	\$3,631.00
	16 MCLELAND RD	Number Street	When was the debt incurred?	<u>6/22/2023</u>	
	SAINT CLOUD, MN 56303	City State ZIP Code	As of the date you file, the claim is: Check all that apply.		
			<input type="checkbox"/> Contingent		
			<input type="checkbox"/> Unliquidated		
			<input type="checkbox"/> Disputed		
	Who incurred the debt? Check one.				
	<input checked="" type="checkbox"/> Debtor 1 only				
	<input type="checkbox"/> Debtor 2 only				
	<input type="checkbox"/> Debtor 1 and Debtor 2 only				
	<input type="checkbox"/> At least one of the debtors and another				
	<input checked="" type="checkbox"/> Check if this claim is for a community debt				
	Type of NONPRIORITY unsecured claim:				
	<input type="checkbox"/> Student loans				
	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts				
	<input checked="" type="checkbox"/> Other. Specify <u>Factoring Company Account</u>				
	Is the claim subject to offset?				
	<input checked="" type="checkbox"/> No				
	<input type="checkbox"/> Yes				
4.12	KIKOFF LENDING LLC	Nonpriority Creditor's Name	Last 4 digits of account number	T K 2 F	\$200.00
	PO BOX 40070	Number Street	When was the debt incurred?	<u>3/20/2024</u>	
	RENO, NV 89504	City State ZIP Code	As of the date you file, the claim is: Check all that apply.		
			<input type="checkbox"/> Contingent		
			<input type="checkbox"/> Unliquidated		
			<input type="checkbox"/> Disputed		
	Who incurred the debt? Check one.				
	<input checked="" type="checkbox"/> Debtor 1 only				
	<input type="checkbox"/> Debtor 2 only				
	<input type="checkbox"/> Debtor 1 and Debtor 2 only				
	<input type="checkbox"/> At least one of the debtors and another				
	<input checked="" type="checkbox"/> Check if this claim is for a community debt				
	Type of NONPRIORITY unsecured claim:				
	<input type="checkbox"/> Student loans				
	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts				
	<input checked="" type="checkbox"/> Other. Specify <u>Charge Account</u>				
	Is the claim subject to offset?				
	<input checked="" type="checkbox"/> No				
	<input type="checkbox"/> Yes				

Debtor 1 Tameia M. Frank Case number (if known) 24-33165
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.					Total claim		
4.13	LVNV FUNDING Nonpriority Creditor's Name C/O RESURGENT CAPITAL SERVICES Number Street GREENVILLE, SC 29602 City State ZIP Code	Last 4 digits of account number	<u>5</u>	<u>5</u>	<u>5</u>	<u>5</u>	\$564.00
		When was the debt incurred?	<u>11/28/2023</u>				
		As of the date you file, the claim is: Check all that apply.					
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed					
		Type of NONPRIORITY unsecured claim:					
		<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____					
		Who incurred the debt? Check one.					
		<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt					
		Is the claim subject to offset?					
		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes					
4.14	MERRICK BANK CORP Nonpriority Creditor's Name PO BOX 9201 Number Street OLD BETHPAGE, NY 11804 City State ZIP Code	Last 4 digits of account number	<u>5</u>	<u>9</u>	<u>2</u>	<u>9</u>	\$1,379.00
		When was the debt incurred?	<u>8/16/2021</u>				
		As of the date you file, the claim is: Check all that apply.					
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed					
		Type of NONPRIORITY unsecured claim:					
		<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>					
		Who incurred the debt? Check one.					
		<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt					
		Is the claim subject to offset?					
		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes					

Debtor 1 Tameia M. Frank Case number (if known) 24-33165

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim

4.15	MIDLAND CREDIT MANAGEM Nonpriority Creditor's Name 320 E BIG BEAVER RD STE Number Street <hr/> TROY, MI 48083 City State ZIP Code	Last 4 digits of account number <u>8 5 4 2</u>	\$728.00
		When was the debt incurred? <u>3/28/2023</u>	
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>FactoringCompanyAccount</u>			
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.16	MIDLAND CREDIT MANAGEM Nonpriority Creditor's Name 320 E BIG BEAVER RD STE Number Street <hr/> TROY, MI 48083 City State ZIP Code	Last 4 digits of account number <u>5 9 2 2</u>	\$689.00
		When was the debt incurred? <u>4/27/2023</u>	
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>FactoringCompanyAccount</u>			
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input checked="" type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1 Tameia M. Frank Case number (if known) 24-33165
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.					Total claim		
4.17	US DEPARTMENT OF EDU Nonpriority Creditor's Name PO BOX 5609 Number Street GREENVILLE, TX 75403 City State ZIP Code	Last 4 digits of account number	<u>3</u>	<u>1</u>	<u>9</u>	<u>4</u>	<u>\$4.00</u>
		When was the debt incurred?	<u>9/22/2013</u>				
		As of the date you file, the claim is: Check all that apply.					
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed					
		Type of NONPRIORITY unsecured claim:					
		<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____					
	Who incurred the debt? Check one.						
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt						
	Is the claim subject to offset?						
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes						
4.18	US DEPARTMENT OF EDU Nonpriority Creditor's Name PO BOX 5609 Number Street GREENVILLE, TX 75403 City State ZIP Code	Last 4 digits of account number	<u>1</u>	<u>2</u>	<u>5</u>	<u>6</u>	<u>\$3.00</u>
		When was the debt incurred?	<u>9/22/2013</u>				
		As of the date you file, the claim is: Check all that apply.					
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed					
	Who incurred the debt? Check one.						
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt						
	Is the claim subject to offset?						
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes						

Debtor 1 Tameia M. Frank Case number (if known) 24-33165
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.				Total claim
4.19	US DEPARTMENT OF EDU Nonpriority Creditor's Name PO BOX 5609 Number Street GREENVILLE, TX 75403 City State ZIP Code	Last 4 digits of account number When was the debt incurred?	<u>3</u> <u>1</u> <u>8</u> <u>5</u> <u>9/22/2013</u>	\$2.00
<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____</p>				
<p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>				
4.20	US DEPARTMENT OF EDU Nonpriority Creditor's Name PO BOX 5609 Number Street GREENVILLE, TX 75403 City State ZIP Code	Last 4 digits of account number When was the debt incurred?	<u>3</u> <u>6</u> <u>4</u> <u>1</u> <u>9/22/2013</u>	\$2.00
<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____</p>				
<p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>				

Debtor 1 Tameia M. Frank Case number (if known) 24-33165
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.				Total claim
4.21 US DEPARTMENT OF EDU				Last 4 digits of account number <u>4 3 9 6</u>
Nonpriority Creditor's Name PO BOX 5609				When was the debt incurred? <u>9/22/2013</u>
Number	Street			
GREENVILLE, TX 75403				As of the date you file, the claim is: Check all that apply.
City	State	ZIP Code	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Who incurred the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt				
Type of NONPRIORITY unsecured claim:				
<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
4.22 US DEPARTMENT OF EDU				Last 4 digits of account number <u>3 6 3 5</u>
Nonpriority Creditor's Name PO BOX 5609				When was the debt incurred? <u>9/22/2013</u>
Number	Street			
GREENVILLE, TX 75403				As of the date you file, the claim is: Check all that apply.
City	State	ZIP Code	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Who incurred the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt				
Type of NONPRIORITY unsecured claim:				
<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor 1 Tameia M. Frank Case number (if known) 24-33165
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.				Total claim
4.23 US DEPARTMENT OF EDU				Last 4 digits of account number <u>4 4 0 1</u>
Nonpriority Creditor's Name PO BOX 5609				When was the debt incurred? <u>9/22/2013</u>
Number	Street			
GREENVILLE, TX 75403				As of the date you file, the claim is: Check all that apply.
City	State	ZIP Code	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Who incurred the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt				
Type of NONPRIORITY unsecured claim:				
<input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
4.24 WAKEFIELD & ASSOCIATES				Last 4 digits of account number <u>6 4 7 0</u>
Nonpriority Creditor's Name 7005 MIDDLEBROOK PIKE				When was the debt incurred? <u>5/18/2023</u>
Number	Street			
KNOXVILLE, TN 37909				As of the date you file, the claim is: Check all that apply.
City	State	ZIP Code	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Who incurred the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Collection Attorney</u>				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor 1 Tameia M. Frank Case number (if known) 24-33165
 First Name Middle Name Last Name

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

1. Nicholas J. Zabala, Law Office LLC

Name

P.O. Box 1359

Number

Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.8 of (Check one):

Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Bensalem, PA 19020

City

State

ZIP Code

Debtor 1

Tameia

M.

Frank

Case number (if known) 24-33165

First Name

Middle Name

Last Name

Part 4:**Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159.
Add the amounts for each type of unsecured claim.

		Total claim
Total claims from Part 1	6a. Domestic support obligations	6a. <u>\$0.00</u>
	6b. Taxes and certain other debts you owe the government	6b. <u>\$170,100.00</u>
	6c. Claims for death or personal injury while you were intoxicated	6c. <u>\$0.00</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + <u>\$0.00</u>
	6e. Total. Add lines 6a through 6d.	<u>\$170,100.00</u>
Total claims from Part 2	6f. Student loans	6f. <u>\$48,308.00</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. <u>\$0.00</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. <u>\$0.00</u>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + <u>\$44,688.00</u>
	6j. Total. Add lines 6f through 6i.	<u>\$92,996.00</u>

Fill in this information to identify your case:

Debtor 1	Tameia	M.	Frank
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	Southern District of Texas		
Case number (if known)	24-33165		

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease			State what the contract or lease is for
2.1	<u>Lynd Company</u> Name <u>2625 Harmony Park Crossing</u> Number Street <u>Spring, TX 77386</u> City State ZIP Code			Apartment Lease (since 2018; renewed 04/2024 and terminates 4/2025) Contract to be ASSUMED
2.2	Name Number Street City State ZIP Code			
2.3	Name Number Street City State ZIP Code			
2.4	Name Number Street City State ZIP Code			

Fill in this information to identify your case:

Debtor 1	Tameia	M.	Frank
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	Southern		District of Texas
Case number (if known)	24-33165		

Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

No
 Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No. Go to line 3.
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

No

Yes. In which community state or territory did you live? **Texas**. Fill in the name and current address of that person.

Byron Jones

Name of your spouse, former spouse, or legal equivalent

2625 Harmony Park Crossing Apt 1428

Number Street

Spring, TX 77386

City State ZIP Code

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1

Sweets with L and L Treats

Name

Post Houston

401 Franklin St

Number Street

Houston, TX 77002

City State ZIP Code

Schedule D, line _____

Schedule E/F, line **4.7**

Schedule G, line _____

3.2

Name

Schedule D, line _____

Number Street

Schedule E/F, line _____

City State ZIP Code

Schedule G, line _____

Fill in this information to identify your case:

Debtor 1	Tameia	M.	Frank
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	Southern District of Texas		
Case number (if known)	24-33165		

Check if this is:

- An amended filing
 A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

	Debtor 1	Debtor 2 or non-filing spouse
Employment status	<input type="checkbox"/> Employed <input checked="" type="checkbox"/> Not Employed	<input type="checkbox"/> Employed <input checked="" type="checkbox"/> Not Employed
Occupation		
Employer's name		
Employer's address	Number Street	Number Street
	_____	_____
	_____	_____
	City _____	City _____
	State _____	State _____
	Zip Code _____	Zip Code _____
How long employed there?	_____	

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be.	2. _____ \$0.00	_____ \$0.00
3. Estimate and list monthly overtime pay.	3. + _____ \$0.00	+ _____ \$0.00
4. Calculate gross income. Add line 2 + line 3.	4. _____ \$0.00	_____ \$0.00

Debtor 1 **Tameia M. Frank** Case number (if known) 24-33165

First Name Middle Name Last Name

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here..... →	4. <u>\$0.00</u>	<u>\$0.00</u>
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. <u>\$0.00</u>	<u>\$0.00</u>
5b. Mandatory contributions for retirement plans	5b. <u>\$0.00</u>	<u>\$0.00</u>
5c. Voluntary contributions for retirement plans	5c. <u>\$0.00</u>	<u>\$0.00</u>
5d. Required repayments of retirement fund loans	5d. <u>\$0.00</u>	<u>\$0.00</u>
5e. Insurance	5e. <u>\$0.00</u>	<u>\$0.00</u>
5f. Domestic support obligations	5f. <u>\$0.00</u>	<u>\$0.00</u>
5g. Union dues	5g. <u>\$0.00</u>	<u>\$0.00</u>
5h. Other deductions. Specify: _____	5h. + <u>\$0.00</u>	+ <u>\$0.00</u>
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6. <u>\$0.00</u>	<u>\$0.00</u>
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. <u>\$0.00</u>	<u>\$0.00</u>
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. <u>(\$437.50)</u>	<u>\$0.00</u>
8b. Interest and dividends	8b. <u>\$0.00</u>	<u>\$0.00</u>
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. <u>\$0.00</u>	<u>\$0.00</u>
8d. Unemployment compensation	8d. <u>\$0.00</u>	<u>\$0.00</u>
8e. Social Security	8e. <u>\$0.00</u>	<u>\$0.00</u>
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. <u>\$0.00</u>	<u>\$0.00</u>
8g. Pension or retirement income	8g. <u>\$0.00</u>	<u>\$0.00</u>
8h. Other monthly income. Specify: _____	8h. + <u>\$0.00</u>	+ <u>\$0.00</u>
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9. <u>(\$437.50)</u>	<u>\$0.00</u>
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10. <u>(\$437.50)</u>	+ <u>\$0.00</u> = <u>(\$437.50)</u>
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____	11. + <u>\$0.00</u>	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Your Assets and Liabilities and Certain Statistical Information</i> , if it applies	12. <u>(\$437.50)</u>	<u>Combined monthly income</u>
13. Do you expect an increase or decrease within the year after you file this form?	<input checked="" type="checkbox"/> No. _____	
	<input type="checkbox"/> Yes. Explain: _____	

Debtor 1	Tameia	M.	Frank	Case number (if known) <u>24-33165</u>
	First Name	Middle Name	Last Name	

8a. Attached Statement

Business Income

FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (NOTE: ONLY INCLUDE information directly related to the business operation.)

PART A - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME:

1. Gross Monthly Income:	<u>\$16,838.89</u>
--------------------------	--------------------

PART B - ESTIMATED AVERAGE FUTURE MONTHLY EXPENSES:

2. Ordinary and necessary expense	\$0.00
3. Net Employee Payroll (Other than debtor)	\$0.00
4. Payroll Taxes	\$0.00
5. Unemployment Taxes	\$0.00
6. Worker's Compensation	\$0.00
7. Other Taxes	\$0.00
8. Inventory Purchases (Including raw materials)	\$0.00
9. Purchase of Feed/Fertilizer/Seed/Spray	\$0.00
10. Rent (Other than debtor's principal residence)	\$0.00
11. Utilities	\$0.00
12. Office Expenses and Supplies	\$0.00
13. Repairs and Maintenance	\$0.00
14. Vehicle Expenses	\$0.00
15. Travel and Entertainment	\$0.00
16. Equipment Rental and Leases	\$0.00
17. Legal/Accounting/Other Professional Fees	\$0.00
18. Insurance	\$0.00
19. Employee Benefits (e.g., pension, medical, etc.)	\$0.00
20. Payments to be Made Directly by Debtor to Secured Creditors for Pre-Petition Business Debts	\$0.00
TOTAL PAYMENTS TO SECURED CREDITORS	\$0.00
21. Other Expenses Expenditures	<u>\$17,276.39</u>
TOTAL OTHER EXPENSES	\$17,276.39
22. TOTAL MONTHLY EXPENSES(Add item 2 - 21)	\$17,276.39

PART C - ESTIMATED AVERAGE NET MONTHLY INCOME:

23. AVERAGE NET MONTHLY INCOME(Subtract item 22 from item 1)	<u>(\$437.50)</u>
--	-------------------

Fill in this information to identify your case:

Debtor 1	Tameia	M.	Frank
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	Southern District of Texas		
Case number (if known)	24-33165		

Check if this is:

- An amended filing
 A supplement showing postpetition chapter 13 expenses as of the following date:

 MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- No. Go to line 2.
 Yes. Does Debtor 2 live in a separate household?
 No
 Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents?

	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes. Fill out this information for each dependent.....	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not list Debtor 1 and Debtor 2.			Spouse		<input type="checkbox"/> No. <input checked="" type="checkbox"/> Yes.
Do not state the dependents' names.			Child	10	<input type="checkbox"/> No. <input checked="" type="checkbox"/> Yes.
			Child	7	<input type="checkbox"/> No. <input checked="" type="checkbox"/> Yes.
					<input type="checkbox"/> No. <input type="checkbox"/> Yes.
					<input type="checkbox"/> No. <input type="checkbox"/> Yes.

3. Do your expenses include expenses of people other than yourself and your dependents?

- No
 Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I).

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

If not included in line 4:

- 4a. Real estate taxes _____ \$0.00
 4b. Property, homeowner's, or renter's insurance _____ \$0.00
 4c. Home maintenance, repair, and upkeep expenses _____ \$0.00
 4d. Homeowner's association or condominium dues _____ \$0.00

Your expenses

Debtor 1

Tameia	M.	Frank
First Name	Middle Name	Last Name

Case number (if known) 24-33165

		Your expenses
5.	Additional mortgage payments for your residence , such as home equity loans	5. <u>\$0.00</u>
6.	Utilities:	
6a.	Electricity, heat, natural gas	6a. <u>\$200.00</u>
6b.	Water, sewer, garbage collection	6b. <u>\$0.00</u>
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. <u>\$277.00</u>
6d.	Other. Specify: _____	6d. <u>\$0.00</u>
7.	Food and housekeeping supplies	7. <u>\$650.00</u>
8.	Childcare and children's education costs	8. <u>\$0.00</u>
9.	Clothing, laundry, and dry cleaning	9. <u>\$150.00</u>
10.	Personal care products and services	10. <u>\$17.00</u>
11.	Medical and dental expenses	11. <u>\$35.00</u>
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. <u>\$400.00</u>
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13. <u>\$50.00</u>
14.	Charitable contributions and religious donations	14. <u>\$0.00</u>
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a.	Life insurance	15a. <u>\$180.00</u>
15b.	Health insurance	15b. <u>\$0.00</u>
15c.	Vehicle insurance	15c. <u>\$140.00</u>
15d.	Other insurance. Specify: _____	15d. <u>\$0.00</u>
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. <u>\$0.00</u>
17.	Installment or lease payments:	
17a.	Car payments for Vehicle 1 <u>2014 Ford F-150 Truck</u>	17a. <u>\$604.00</u>
17b.	Car payments for Vehicle 2	17b. <u>\$0.00</u>
17c.	Other. Specify: _____	17c. <u>\$0.00</u>
17d.	Other. Specify: _____	17d. <u>\$0.00</u>
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18. <u>\$0.00</u>
19.	Other payments you make to support others who do not live with you. Specify: _____	19. <u>\$0.00</u>
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	
20a.	Mortgages on other property	20a. <u>\$0.00</u>
20b.	Real estate taxes	20b. <u>\$0.00</u>
20c.	Property, homeowner's, or renter's insurance	20c. <u>\$0.00</u>
20d.	Maintenance, repair, and upkeep expenses	20d. <u>\$0.00</u>
20e.	Homeowner's association or condominium dues	20e. <u>\$0.00</u>

Debtor 1

Tameia	M.	Frank
First Name	Middle Name	Last Name

Case number (if known) 24-33165

21. Other. Specify: _____

21. + \$0.00

22. Calculate your monthly expenses.

22a. Add lines 4 through 21.

22a. \$5,153.00

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22b. \$0.00

22c. Add line 22a and 22b. The result is your monthly expenses.

22c. \$5,153.00

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.

23a. (\$437.50)

23b. Copy your monthly expenses from line 22c above.

23b. - \$5,153.00

23c. Subtract your monthly expenses from your monthly income.

The result is your *monthly net income*.23c. (\$5,590.50)

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

 No.

None

 Yes.

Debtor 1

Tameia	M.	Frank
First Name	Middle Name	Last Name

Case number (if known) 24-33165**Amount****6c. Telephone, cell phone, Internet, satellite, and cable services**

Internet & TV Services	\$77.00
Phone	\$200.00

Fill in this information to identify your case:

Debtor 1	Tameia	M.	Frank
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	Southern District of Texas		
Case number (if known)	24-33165		

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets

Your assets

Value of what you own

1. Schedule A/B: Property (Official Form 106A/B)

1a. Copy line 55, Total real estate, from Schedule A/B.....	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B.....	\$24,172.52
1c. Copy line 63, Total of all property on Schedule A/B.....	\$24,172.52

Part 2: Summarize Your Liabilities

Your liabilities

Amount you owe

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)

2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of Schedule D.....	\$66,771.00
---	--------------------

3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F.....	\$170,100.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F.....	+ \$92,996.00

Your total liabilities

\$329,867.00

Part 3: Summarize Your Income and Expenses

4. Schedule I: Your Income (Official Form 106I)

Copy your combined monthly income from line 12 of Schedule I.....	(\$437.50)
---	-------------------

5. Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22c of Schedule J.....	\$5,153.00
---	-------------------

Debtor 1	Tameia	M.	Frank	Case number (if known) <u>24-33165</u>
	First Name	Middle Name	Last Name	

Part 4: Answer These Questions for Administrative and Statistical Records**6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**

- No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
 Yes

7. What kind of debt do you have?

- Your debts are primarily consumer debts.** Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Total claim

From Part 4 on Schedule E/F, copy the following:

9a. Domestic support obligations (Copy line 6a.) _____

9b. Taxes and certain other debts you owe the government. (Copy line 6b.) _____

9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) _____

9d. Student loans. (Copy line 6f.) _____

9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) _____

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) + _____

9g. **Total.** Add lines 9a through 9f. _____

Fill in this information to identify your case:

Debtor 1	Tameia	M.	Frank
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	Southern District of Texas		
Case number (if known)	24-33165		

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No
 Yes. Name of person _____ Attach *Bankruptcy Petitioner's Notice, Declaration, and Signature (Official Form 119)*.

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

 /s/ Tameia M. Frank
Tameia M. Frank, Debtor 1

Date 08/13/2024
MM/ DD/ YYYY

Fill in this information to identify your case:

Debtor 1	Tameia	M.	Frank
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	Southern District of Texas		
Case number (if known)	24-33165		

Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

- Married
 Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

- No

Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
Number Street	From _____ To _____	Number Street	From _____ To _____
City	State ZIP Code	City	State ZIP Code
Number Street	From _____ To _____	Number Street	From _____ To _____
City	State ZIP Code	City	State ZIP Code

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- No
 Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Debtor 1 **Tameia M. Frank** Case number (if known) 24-33165

First Name Middle Name Last Name

Part 2: Explain the Sources of Your Income

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

No

Yes. Fill in the details.

	Debtor 1		Debtor 2
	Sources of income	Gross Income	Sources of income
	Check all that apply.	(before deductions and exclusions)	Check all that apply.
From January 1 of current year until the date you filed for bankruptcy:	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business		<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
For last calendar year: (January 1 to December 31, <u>2023</u>) YYYY	<input type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	<u>\$19,691.00</u>	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
For the calendar year before that: (January 1 to December 31, <u>2022</u>) YYYY	<input type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	<u>\$27,753.00</u>	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

No

Yes. Fill in the details.

	Debtor 1		Debtor 2
	Sources of income	Gross income from each source	Sources of income
	Describe below.	(before deductions and exclusions)	Describe below.
From January 1 of current year until the date you filed for bankruptcy:	Stmt Fin Aff #4 YTD Business Income and Exp: Revenue \$100,895.30 less Exp \$103,382.30 Net Business Loss: (\$2,487)	\$100,895.30	
For last calendar year: (January 1 to December 31, <u>2023</u>) YYYY			

Debtor 1 **Tameia M. Frank** Case number (if known) 24-33165

First Name Middle Name Last Name

For the calendar year before that: _____
 (January 1 to December 31, 2022)
 YYYY

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$7,575* or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$7,575* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

	Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
<u>Lynd Company</u> Creditor's Name	<u>6/1/2024</u>	<u>\$7,800.00</u>	_____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Residential <input checked="" type="checkbox"/> Other Lease
<u>2625 Harmony Park Crossing</u> Number Street	<u>5/1/2024</u>			
<u>Spring, TX 77386</u> City State ZIP Code	<u>4/1/2024</u>			
<u>JPMCB Auto Finance</u> Creditor's Name	<u>6/24/2024</u>	<u>\$1,812.00</u>	<u>\$15,828.00</u>	<input type="checkbox"/> Mortgage <input checked="" type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
<u>PO Box 901003</u> Number Street	<u>5/24/2024</u>			
<u>Fort Worth, TX 76101-0000</u> City State ZIP Code	<u>4/24/2024</u>			

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

No

Yes. List all payments to an insider.

Debtor 1	Tameia	M.	Frank	Case number (if known) <u>24-33165</u>
	First Name	Middle Name	Last Name	
	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name				
Number Street				
City State ZIP Code				

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?
Include payments on debts guaranteed or cosigned by an insider.

No

Yes. List all payments that benefited an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Insider's Name				
Number Street				
City State ZIP Code				

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

No

Yes. Fill in the details.

	Nature of the case	Court or agency	Status of the case
Case title	Funding Metrics, LLC vs. Tameia Marie Frank d/b/a Sweets with L&L	Arbitration Court Name	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
Case number		Number Street	
		City State ZIP Code	

Debtor 1 **Tameia M. Frank** Case number (if known) **24-33165**

First Name

M.

Last Name

	Nature of the case	Court or agency	Status of the case
Case title	Jaris Funding, LLC vs. Sweets with L&L, et. al	Add Court Court Name Number Street City State ZIP Code	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number			

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?
Check all that apply and fill in the details below.

 No. Go to line 11. Yes. Fill in the information below.

Describe the property	Date	Value of the property
Explain what happened		
<input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied.		
Creditor's Name _____ Number Street _____ City State ZIP Code		

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

 No Yes. Fill in the details.

Describe the action the creditor took	Date action was taken	Amount taken
Last 4 digits of account number: XXXX-_____		
City State ZIP Code		

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

 No Yes

Debtor 1 **Tameia M. Frank**
 First Name Middle Name Last Name
 Case number (if known) 24-33165

Part 5: List Certain Gifts and Contributions**13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?** No Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift			
Number Street			
City State ZIP Code			
Person's relationship to you _____			

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
Charity's Name			
Number Street			
City State ZIP Code			

Part 6: List Certain Losses**15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?** No Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss	Date of your loss	Value of property lost
Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.			

Debtor 1 **Tameia M. Frank**
 First Name Middle Name Last Name
 Case number (if known) 24-33165

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

No

Yes. Fill in the details.

Resolve Law Group	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid			
801 Travis Street Suite 2101	Attorney's Fee	7/3/2024	\$363.00
Number Street			
Houston, TX 77002			
City State ZIP Code			
Email or website address			
Person Who Made the Payment, if Not You			

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

No

Yes. Fill in the details.

Resolve Law Group	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid			
Number Street			
CITY, STATE ZIP CODE			
City State ZIP Code			

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property).

Do not include gifts and transfers that you have already listed on this statement.

No

Yes. Fill in the details.

Debtor 1 **Tameia M. Frank** Case number (if known) 24-33165

First Name

M.

Last Name

Person Who Received Transfer

Number Street

City State ZIP Code

Person's relationship to you _____

Description and value of property transferred**Describe any property or payments received or debts paid in exchange****Date transfer was made**

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

 No Yes. Fill in the details.**Description and value of the property transferred****Date transfer was made**

Name of trust _____

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

 No Yes. Fill in the details.**Last 4 digits of account number****Type of account or instrument****Date account was closed, sold, moved, or transferred****Last balance before closing or transfer****Truist Bank**

Name of Financial Institution

XXXX- _____

 Checking04/2024\$0.00 Savings Money market Brokerage Other _____

Number Street

City State ZIP Code

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

 No Yes. Fill in the details.

Debtor 1 **Tameia M. Frank** Case number (if known) 24-33165

Who else had access to it?			Describe the contents	Do you still have it?
Name of Financial Institution	Name			<input type="checkbox"/> No <input type="checkbox"/> Yes
Number Street	Number	Street		
	City	State ZIP Code		
City	State	ZIP Code		

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

No

Yes. Fill in the details.

Who else has or had access to it?			Describe the contents	Do you still have it?
Name of Storage Facility	Name			<input type="checkbox"/> No <input type="checkbox"/> Yes
Number Street	Number	Street		
	City	State ZIP Code		
City	State	ZIP Code		

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

No

Yes. Fill in the details.

Where is the property?			Describe the property	Value
Owner's Name	Number Street			
Number Street				
	City	State ZIP Code		
City	State	ZIP Code		

Debtor 1

Tameia M.

Frank

Case number (if known) 24-33165

First Name

Middle Name

Last Name

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- *Environmental law* means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- *Site* means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- *Hazardous material* means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.**24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?** No Yes. Fill in the details.

Governmental unit		Environmental law, if you know it	Date of notice
Name of site	Governmental unit		
Number Street	Number Street		
		City State ZIP Code	
		City State ZIP Code	

25. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details.

Governmental unit		Environmental law, if you know it	Date of notice
Name of site	Governmental unit		
Number Street	Number Street		
		City State ZIP Code	
		City State ZIP Code	

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details.

Debtor 1 **Tameia M. Frank** Case number (if known) **24-33165**

			Court or agency	Nature of the case	Status of the case
Case title	Court Name				<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
	Number	Street			
Case number	City	State	ZIP Code		

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- A member of a limited liability company (LLC) or limited liability partnership (LLP)
- A partner in a partnership
- An officer, director, or managing executive of a corporation
- An owner of at least 5% of the voting or equity securities of a corporation
- No. None of the above applies. Go to Part 12.

Yes. Check all that apply above and fill in the details below for each business.

Sweets with L and L Name <u>Post Houston</u>	Describe the nature of the business Cotton Candy Stand in Food Court	Employer Identification number Do not include Social Security number or ITIN. EIN: _____
Number Street <u>401 Franklin St</u> City State ZIP Code <u>Houston, TX 77002-1569</u>	Name of accountant or bookkeeper Tim Frank (Debtor's brother), Integrity Tax Bookkeeping Services, Austin, TX	Dates business existed From <u>2017</u> To <u>10/2023</u>
Sweets with L and L Treats Name <u>Post Houston</u>	Describe the nature of the business Cotton Candy Stand in Food Court	Employer Identification number Do not include Social Security number or ITIN. EIN: _____
Number Street <u>401 Franklin St</u> City State ZIP Code <u>Houston, TX 77002</u>	Name of accountant or bookkeeper Tim Frank (Debtor's brother), Integrity Tax Bookkeeping Services, Austin, TX	Dates business existed From <u>10/2023</u> To <u>04/2024</u>

Debtor 1	Tameia	M.	Frank	Case number (if known) <u>24-33165</u>
	First Name	Middle Name	Last Name	
<u>Sweet Treats with L and L LLC</u> <u>dba Sweets with L&L Cotton Candy</u> <u>Name</u>			Describe the nature of the business <u>Cotton Candy Stand in Food Court</u>	Employer Identification number Do not include Social Security number or ITIN. EIN: <u>9 9 - 2 7 1 6 4 1 9</u>
<u>Post Houston</u> <u>401 Franklin St</u> Number Street			Name of accountant or bookkeeper	Dates business existed From <u>5/2024</u> To _____
<u>Houston, TX 77002</u> City State ZIP Code				

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

No

Yes. Fill in the details below.

Date issued

Name	MM / DD / YYYY
Number Street	
City	State ZIP Code

Debtor 1 Tameia M. Frank Case number (if known) 24-33165

First Name Middle Name Last Name

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

 /s/ Tameia M. Frank

Signature of Tameia M. Frank, Debtor 1

Date 08/13/2024

Did you attach additional pages to your *Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

No

Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person _____

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:

Debtor 1	Tameia	M.	Frank
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	Southern District of Texas		
Case number (if known)	24-33165		

 Check if this is an amended filing**Official Form 122A-1Supp****Statement of Exemption from Presumption of Abuse Under § 707(b)(2)**

12/15

File this supplement together with *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1), if you believe that you are exempted from a presumption of abuse. Be as complete and accurate as possible. If two married people are filing together, and any of the exclusions in this statement applies to only one of you, the other person should complete a separate Form 122A-1 if you believe that this is required by 11 U.S.C. § 707(b)(2)(C).

Part 1: Identify the Kind of Debts You Have

1. **Are your debts primarily consumer debts?** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." Make sure that your answer is consistent with the answer you gave at line 16 of the *Voluntary Petition* (Official Form 101).

- No. Go to Form 122A-1; on the top of page 1 of that form, check box 1, *There is no presumption of abuse*, and sign Part 3. Then submit this supplement with the signed Form 122A-1.
- Yes. Go to Part 2.

Part 2: Determine Whether Military Service Provisions Apply to You

2. **Are you a disabled veteran** (as defined in 38 U.S.C. § 3741(1))?

- No. Go to line 3.
- Yes. Did you incur debts mostly while you were on active duty or while you were performing a homeland defense activity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).
- No. Go to line 3.
- Yes. Go to Form 122A-1; on the top of page 1 of that form, check box 1, *There is no presumption of abuse*, and sign Part 3. Then submit this supplement with the signed Form 122A-1.

3. **Are you or have you been a Reservist or member of the National Guard?**

- No. Complete Form 122A-1. Do not submit this supplement.
- Yes. Were you called to active duty or did you perform a homeland defense activity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1)

No. Complete Form 122A-1. Do not submit this supplement.

Yes. Check any one of the following categories that applies:

- I was called to active duty after September 11, 2001, for at least 90 days and remain on active duty.
- I was called to active duty after September 11, 2001, for at least 90 days and was released from active duty on _____, which is fewer than 540 days before I file this bankruptcy case.
- I am performing a homeland defense activity for at least 90 days.
- I performed a homeland defense activity for at least 90 days, ending on _____, which is fewer than 540 days before I file this bankruptcy case.

If you checked one of the categories to the left, go to Form 122A-1. On the top of page 1 of Form 122A-1, check box 3, *The Means Test does not apply now*, and sign Part 3. Then submit this supplement with the signed Form 122A-1. You are not required to fill out the rest of Official Form 122A-1 during the exclusion period. The *exclusion period* means the time you are on active duty or are performing a homeland defense activity, and for 540 days afterward. 11 U.S.C. § 707(b)(2)(D)(ii).

If your exclusion period ends before your case is closed, you may have to file an amended form later

Fill in this information to identify your case:

Debtor 1	Tameia	M.	Frank
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Southern District of Texas			
Case number (if known)	24-33165		

Check one box only as directed in this form and in Form 122A-1Supp:

1. There is no presumption of abuse.
2. The calculation to determine if a presumption of abuse applies will be made under *Chapter 7 Means Test Calculation* (Official Form 122A-2).
3. The Means Test does not apply now because of qualified military service but it could apply later.
- Check if this is an amended filing

Official Form 122A-1**Chapter 7 Statement of Your Current Monthly Income**

12/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 122A-1Supp) with this form.

Part 1: Calculate Your Current Monthly Income**1. What is your marital and filing status? Check one only.**

- Not married.** Fill out Column A, lines 2-11.
- Married and your spouse is filing with you.** Fill out both Columns A and B, lines 2-11.
- Married and your spouse is NOT filing with you. You and your spouse are:**
- Living in the same household and are not legally separated.** Fill out both Column A and B, lines 2-11.
 - Living separately or are legally separated.** Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

Column A Debtor 1	Column B Debtor 2 or non-filing spouse
----------------------	--

2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).

3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.

4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.

5. Net income from operating a business, profession, or farm

Debtor 1 Debtor 2

Gross receipts (before all deductions)

Ordinary and necessary operating expenses

Net monthly income from a business, profession, or farm

Copy here →

6. Net income from rental and other real property

Debtor 1 Debtor 2

Gross receipts (before all deductions)

Ordinary and necessary operating expenses

Net monthly income from rental or other real property

Copy here →

7. Interest, dividends, and royalties

Tameia M. Frank
 First Name Middle Name Last Name

Column A
Debtor 1Column B
Debtor 2 or
non-filing spouse**8. Unemployment compensation**

Do not enter the amount if you contend that the amount received was a benefit under

the Social Security Act. Instead, list it here: ↓

For you..... _____

For your spouse..... _____

9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.

10. Income from all other sources not listed above. Specify the source and amount.

Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.

_____ + _____ = _____
 Total amounts from separate pages, if any.

11. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.

_____ + _____ = _____
 _____ + _____ = _____
 Total current monthly income

Part 2: Determine Whether the Means Test Applies to You

12. Calculate your current monthly income for the year. Follow these steps:

12a. Copy your total current monthly income from line 11.....

Copy line 11 here → _____

X 12

Multiply by 12 (the number of months in a year).

12b. The result is your annual income for this part of the form.

12b. _____

13. Calculate the median family income that applies to you. Follow these steps:

Fill in the state in which you live. _____

Fill in the number of people in your household. _____

Fill in the median family income for your state and size of household.....

13. _____

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

14. How do the lines compare?

14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse.*
 Go to Part 3.

14b. Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 122A-2.*
 Go to Part 3 and fill out Form 122A-2.

TameiaM.Frank

First Name

Middle Name

Last Name

Part 3: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X/s/ Tameia M. Frank

Signature of Debtor 1

Date 08/13/2024

MM/ DD/ YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Fill in this information to identify your case:

Debtor 1	Tameia	M.	Frank
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	Southern District of Texas		
Case number (if known)	24-33165		

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

- For any creditors that you listed in Part 1 of *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral		What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name:	MERCEDES BENZ FINANCIA	<input checked="" type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]: _____	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Description of property securing debt:	2017 Mercedes-Benz GLE 450 Vehicle was totaled in an auto accident on 07/28/2024		
Creditor's name:	JPMCB - AUTO FINANCE	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input checked="" type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]: _____	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Description of property securing debt:	2014 Ford F-150 Truck		

Debtor 1 **Tameia** **M.** **Frank** **Case number (if known)** 24-33165

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases		Will the lease be assumed?
Lessor's name:	Lynd Company	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Description of leased property:	Apartment Lease (since 2018; renewed 04/2024 and terminates 4/2025)	
Lessor's name:	<input type="checkbox"/> No <input type="checkbox"/> Yes	
Description of leased property:	<input type="checkbox"/> No <input type="checkbox"/> Yes	
Lessor's name:	<input type="checkbox"/> No <input type="checkbox"/> Yes	
Description of leased property:	<input type="checkbox"/> No <input type="checkbox"/> Yes	
Lessor's name:	<input type="checkbox"/> No <input type="checkbox"/> Yes	
Description of leased property:	<input type="checkbox"/> No <input type="checkbox"/> Yes	
Lessor's name:	<input type="checkbox"/> No <input type="checkbox"/> Yes	
Description of leased property:	<input type="checkbox"/> No <input type="checkbox"/> Yes	
Lessor's name:	<input type="checkbox"/> No <input type="checkbox"/> Yes	
Description of leased property:	<input type="checkbox"/> No <input type="checkbox"/> Yes	

Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

X /s/ Tameia M. Frank

Signature of Debtor 1

Date **08/13/2024**
MM/ DD/ YYYY